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Project Head Start has as its goal the improvement of the child's physical health, intellectual performance, social attitudes, and sense of self. The project involves over half a million children each year, including children in both summer and yearlong programs. About 40 percent of Head Start pupils are Negro, about 30 percent are white, and the others come from other racial backgrounds. These children come from economically or culturally disadvantaged homes. Head Start children (although they perform more poorly on academic tasks and tests than their middle class peers) perform significantly better than low income children who do not participate in Head Start. This improvement in performance by Head Start pupils has been attributed to (1) partial middle class acculturation, (2) the higher quality of the educational program, (3) the warmth and competency of teachers, and (4) increased parental interest in the child's development. There remain questions about the endurance of the gains made by Head Start children and about the relative merits of the short summer program compared to the yearlong program. (WD)

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PROJECT HEAD START· EVALUATION AND RESEARCH

SUMMARY 1965-1967

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PROJECT HEAD START: EVALUATION AND RESEARCH

1965-1967

Even before kindergarten age, noticeable differences have been found between low income and middle-class children in their ability to learn and relate to the world and people around them. While the low income child's life may be rich in many areas, his environment often lacks the stimulation necessary to prepare him for school experiences. Schools for children under five have existed for over 200 years, but they have been provided mostly for middle-class children, thus tending to increase differences in school readiness between economically comfortable and economically disadvantaged groups. As the problems of the jobless poor, such as insufficient education for employment, are perpetuated from generation to generation, it becomes more and more evident that the cycle of poverty must be combatted at an early age. As a step in this direction, Project Head Start was initiated in the summer of 1965, both as an eight-week pre-school program for disadvantaged children, and with programs running the full length of a school year.

While traditional preschools have been geared toward developing social and conceptual skills through a free-play experience, the organizers of Head Start realized that particularly in the case of the disadvantaged child a concern for his total environment would be necessary in order to bring about sufficient change. Under the assumption that a child cannot function optimally if his

health or welfare is impaired, Head Start Centers were designed to offer medical, nutritional, dental, psychological and social services as an integral part of the nursery program. To work more closely with the child's home environment, it was proposed that parents be involved in all aspects of Head Start: in policy-making, as teachers' aides and in discussion groups with other parents and staff.

Head Start opened its first centers in 1965 in 40% of the counties in continental United States, Alaska, Hawaii, Puerto Rico, The Virgin Islands and Guam. The programs have varied from center to center, both in the emphasis placed on the various auxiliary services and in the teaching methods employed; but all have had as their goal the improvement of the child's physical health, his intellectual performance, his social attitudes and, most important, his sense of himself. From the beginning, an evaluative and research arm has been operating to observe and appraise the different efforts and to generate ideas for further experimentation. Feedback from both national and small scale studies has been slow (only now are reports based on the 1966-67 full year program completed and available, because of the time-consuming process of assimilating and digesting data). Nevertheless, some preliminary statements can be made about the kinds of people whom Head Start programs involve and the impact which the Project has had in their lives.

While early projections had estimated 100,000 children and 12,000 teachers would participate in the summer 1965 program, more than 560,000 children were finally enrolled and a staff of 184,000 paid and volunteer workers enlisted. In the following

two years, the summer programs have remained at a fairly stable level involving around half a million children. Full year programs were initiated in the fall of 1965 to offer the same types of services over a longer period, and these have multiplied ten-fold from a small enrollment of 20,000 to 215,000 in 1967. As of 1967, over two million children have taken part in more than 13,000 centers at an average cost of $220 per child in the summer programs and $1050 per child in the full-year programs. These figures are somewhat higher than cost estimates for conventional preschool programs, of course, because of the intensive daily activities program and extended comprehensive nature of Head Start's medical, psychological, and social services.

The eastern and southwestern states have led other regions in the number of children enrolled in Head Start programs. The centers have been distributed evenly over rural and urban areas; however urban centers have tended to be larger, and 60% of the Head Starters have been urban children. One-third of the programs are operated by public schools, 10% by private schools, and the rest by community action and private organizations. There are slightly more boys in the program than girls; the average age for both sexes has been five years and ten months. Over 40% are Negro and 30% white (among which one-third are Puerto Rican). In descending order, other groups include Mexican Americans, American Indians, Orientals and Eskimos.

Head Start began by opening centers in neighborhoods or areas of severe poverty. It is not always easy to reach the most needy within these deprived pockets, and the Project has only gradually approached its primary goal of a 90% enrollment of children whose

families live at the poverty level. When household size is considered (60% of the Head Start families contain six or more people), a considerably higher proportion of the children enrolled in the Project during 1966-67 fall within this definition of severe economic poverty. A little under one-fourth of the families receive public welfare; about the same proportion lack a father living in the home. Centers have been filled through a combination of voluntary enrollment and wider recruitment measures to bring in the more reluctant families within the poor communities. It is not surprising that within the category of economic poverty, those parents who volunteered to participate in the early Head Start programs seemed to feel less alienated from American society. One study of a city-wide program indicated that Head Start families held more positive attitudes towards legal authority and the church, were more optimistic about anti-poverty programs, made greater use of community welfare resources, were more verbally skilled and better educated, were more socially outgoing, and had more intact family structures than economically comparable non-Head Start families. In an investigation of parental participation among Spanish-speaking families, it was discovered that nonparticipant families not only lacked information about the Project, but were also generally out of touch with the mainstream communication channels. As Head Start becomes more widely known in local communities, the more socially isolated families who have not yet participated in the program may be increasingly induced to make use of Head Start.

The social and cultural disadvantages of Head Start families have been revealed dramatically. Among the summer 1965 children 45% had no toys, books, magazines, crayons, paints or even paper. About half had not seen a physician within the past year. Although only 10% of the Head Starters in two years have been diagnosed as having severe emotional disturbances, they have generally been characterized as restless, anxious and unskilled in social interaction with both peer and adult groups. Their self-esteem is strikingly low, and they tend to be distrustful of others and to perceive teachers as threatening.

When compared to randomly selected populations of middle-class children on measures of intelligence, academic ability and school readiness, the children in Head Start consistently perform more poorly. They show much narrower ranges of academically related social experience and are less responsive to traditional learning tasks than middle-class children. Within the Head Start group itself, children from Spanish-speaking homes have scored less than Negroes and whites in articulation and use of the English language, an additional disadvantage for the bilingual child in an English-speaking school system.

The extent to which medical services are needed by children in Head Start is clear from the fact that during the 1966 summer and full-year programs over 70% of those examined needed care for one or more health problems. Head Start centers have gone far in providing medical services for their children. Nearly 90% have employed a

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physician, 70% a nurse, 66% a social worker, 50% a psychiatrist or psychologist, and 48% a nutritionist at least part-time. Diagnostic services have generally been excellent: nearly 90% of the children in summer 1967 programs, for example, had vision screening tests, dental and medical examinations. While the short duration of the summer programs and the lack of available facilities in some communities have made follow-up more difficult, a large proportion of Head Start children have also received preliminary treatment and/or referral. The survey of summer 1967 health services revealed that 8% failed to pass the vision test. Sixty percent of these had been fully evaluated and cared for by the end of the summer program, and funds are provided to continue to care for the remainder of the children. More than 60% of those given dental exams needed treatment, and 55% of this group had complete dental care by the end of the summer. While only 17% of the children examined had serious medical disabilities, follow-up was particularly thorough in this area: 82% were receiving or had completed the necessary evaluation and treatment by the end of the 1967 summer.

One of Head Start's main objectives has been to increase the child's readiness for learning in public school, and much research has been concerned with evaluating the Project's impact on children's cognitive and intellectual performances. A number of widely used standard tests are available to assess this, and it has been relatively easy to measure the changes in performance on intelligence tests, school readiness tests and tests of psychomotor performance. The early notion of intelligence as a fixed quantity which remains constant throughout the life of the individual has been more or less discredited by modern psychologists.

Newer approaches stress wide differences which the environment can make on a given potential and imply, therefore, that many features in the poverty environment retard the development of traditional and testable areas of intelligence. It would seem that the enrichment of Head Start, which provides a more middle-class experience, should raise achievement on these tests. Indeed, it was found again and again that children who attend Head Start advance in measures of intelligence to significantly higher levels, with little or no relation to the particular style of program. Although still usually not yet on par with middle-class children, their scores show gains of about 10 points or more from the time they enter the Head Start project, and put them significantly above children of comparable backgrounds who were not Head Starters.

The reasons for these dramatic changes which occur, even in a two-month period, are open to several interpretations - all of which still point to the success of the program. For example, it is possible that the Head Start experience does not directly modify the general intelligence of the child, but succeeds rather in cultivating particular skills through training or practice. The programs provide experience with toys and material which are comparable to intelligence test materials, thus increasing the child's familiarity with them and ability to use them before the second test. Experience with warm, interested adults may also enhance the child's performance.

Because psychological evaluations of preschool children cannot be conducted impersonally with paper and pencil tests, the testing situation itself involves social interaction, and the rise in scores may also reflect the increasing comfort the disadvantaged child feels with a middle-class adult. It may also be that disadvantaged children are initially less motivated to perform well on tests, but that the Head Start experience enables them to become more task-oriented, more responsive to both the tester and the materials. For whatever reasons the intelligence test scores rise, the increase in I.Q. ratings is a promising outcome.

In analyzing these intelligence test increases, there is evidence that some classroom situations have had better effects than others. In one study, rises in I.Q. test performance were correlated with modifications of social behavior: those children who managed to make friends for the first time outside of their ethnic group showed the greatest improvement. In another study, maximum intelligence test change was associated with greater communication between the teacher and the class as a group. Another study showed rise in I.Q. to be correlated with moderate (neither too much nor too little) supportive encouragement by the teacher. This may be particularly applicable to children from the backgrounds with which Head Start deals. Teachers who were already experienced with very young children were found to be more successful than teachers without preschool experience, who were accustomed to older children. At present, different preschool programs are being conducted according to the Montessori, Bereiter, Sprigle and other

experimental methods in an effort to determine which are best suited for socially disadvantaged children.

Although changes of attitudes, motivation and social behavior in preschool children are not so easily measured, there is rather uniform evidence that Head Start produces improvement in these areas. Head Start teachers are the strongest supporters of this contention. It is difficult,however, to validate their ratings, as different teachers have different yardsticks. Direct observation by outside investigators has therefore been used, as well as objective check-lists regarding the child's everyday behavior. Data taken from these and other sources further corroborate the assumption that the Head Start child shows more socially appropriate behavior at the end of the program than when he entered: he displays sharper interest in the world around him, improved interaction patterns with adults and other children, and better task-orientation. He also appears to acquire a more confident image of himself, more trust in others in his age group, and a less alienated attitude towards authority. All these factors give the child a greater chance for success in elementary school, freeing him in many areas from the disadvantages of his environment.

That the Head Start child enters public school with very real gains over his abilities prior to the nursery experience is fairly well established, but there are important questions about the durability of these gains once the child is out of the program. There has been much discussion of a so-called "fade-out" phenomenon in the

advances made by Head Start children, but this is a mislabeling of what actually occurs. For example, research has shown that Head Start children who enter a middle class public school continued to improve, while Head Starters who go to a school in a depressed area tended to level off to a fairly stable level, permitting non-Head Starters to catch up to them. This levelling-off of test scores has been observed in only one dimension, that of intelligence measurements. Attendance rates, and motivation and interest in learning, for example, continue to be much better among Head Start graduates than among other children of the same class. Furthermore, this levelling-off is not a loss in test scores, but rather a maintaining of the score that was achieved. Since children at this age serve as strong models for each other, Head Start children may even be said to help the others come up to their level: in one study, it was found that when a classroom was composed of more than 50% Head Start graduates the teacher could pass through the curriculum more rapidly than when there were only a few or no children with Head Start experience in her class.

It has also been found that children whose parents were voluntarily participants in Head Start continued to do better once out than children whose parents had been actively recruited for participation in the program. This may be because the latter were never as interested in their children's education and did not help them as much as the other parents did once the program was over. One study suggests that children who have younger brothers and sisters enrolled in a Head Start program, thereby retaining the parents' involvement, do better in school than those with no younger siblings in the program.

Head Start has continually emphasized the necessity of bringing parents into all areas of the Project, and most centers have shown great creativity in using their parents' talents and interests. The new Parent-and-Child Centers to be operated under the auspices of Head Start reflect the concern of the Office of Economic Opportunity to bring parents into a deeper and more active involvement with their children and the community.

An interesting pattern of findings about the durability of Head Start's beneficial effects on the child has been suggested in studies revealing a later "bloom" of Head Start children during the second year after their Head Start experience. What accounts for such delayed bloom cannot yet be pinned down from the limited data available: it may be related to the quality of the public school program, or to the changing nature of curricular demands and tasks as the child grows older. More importantly, it is possible that Head Start's most important real benefit to the child may be a set of attitudes, values, and habits which permit him to continue to make full use of his opportunities to learn, rather than merely a set of specific school-related skills.

A survey of 1965 summer Head Start parents revealed that most viewed the program as having been beneficial to their children. They saw their children as excited about new things and as having more interest in school and other people. In addition, they felt they had learned useful information about child development and rearing, and that their own aspirations had been raised. Interestingly, Negro workers and parents showed more enthusiasm for the Head Start idea

than did whites. Among the teacher group, the Negroes appeared to be more accepting of the disadvantaged child and more optimistic about their own and Head Start's chances for success in making an impact on the lives of the children.

Neighborhoods and communities in which Head Start centers have been located have also felt the influence of the Project, although to what extent is not yet known. There is a need for data about the attitudes and degree of involvement of specific people within the community, such as school officials, political and social leaders. Census data on medical, dental, psychological and social service referrals suggest that community welfare agencies may be used more widely than before. Public opinion toward Head Start as reflected in the press has been highly favorable. From 100 intensive interviews with mothers following 1965 summer Head Start, investigators concluded that medical follow-ups have on the whole been good, that attitudes of parents and workers were excellent, that the poor had been actively involved in the program (although not sufficiently at policy-making levels), and that Head Start had brought about the identification and awareness of both community problems and services.

Since Head Start has explored the feasibility of both short term summer programs and full academic year programs, several critical questions may be raised concerning the relationship between program duration and program impact. Such questions are difficult to answer through comparative studies, since the Summer Head Start and Full Year Head Start programs are not ordinarily comparable.

Only a very few communities have operated both, and it is difficult to match one community against another for comparison purposes. Furthermore, they tend to operate with vastly different resources of both personnel and physical facilities, since the summer programs can often capitalize on the availability of public school resources whereas the full year programs cannot. Moreover, the two kinds of program tend to set rather different kinds of priorities on overall objectives, and they have tended to adopt different means of attempting to achieve these objectives. Thus, to compare summer programs to full year programs would be to try to compare apples with oranges. It would appear, though, from available evaluative studies of each kind of program that both are successful in elevating the child's measured intelligence and school-related skills, as well as in enhancing his motivation to achieve through learning and his general concept of himself. Since the longer duration programs are better enabled to provide continuing treatment of the child's deficits and to work directly with his family, it is likely that the full year programs are in a better position to achieve durable significant gains for the child. However, there is not yet sufficient information available to warrant a definitive statement on this issue.

Another important question still to be answered is that of lasting effect on the poor once they are no longer involved in Head Start. The durability of Head Start's impact upon its participants may be very much enhanced through the new Follow Through program. By continuing to implement the Head Start concept through the primary grades in public school, providing educational, social, and medical services over a period of several years, Follow Through will seek to narrow the

odds against the disadvantaged child and enable him to stand a better chance of achieving his full potential later on.

Head Start's research and evaluation program is a vital link in the development of program policy. Venturing into unexplored areas of study with very young disadvantaged children and their families, firm immediate answers to critical questions are not always possible. However, by stepwise progression from the tentative and suggestive leads from early research, to gradually more definitive and specific evaluative investigations, the results of investments in research can be fed back into improved programs and greater success in meeting the needs of poor families and facilitating the development of disadvantaged children.

The directions for further research in Head Start are well defined. The preliminary indication of success needs to be confirmed by more rigorous studies, especially studies which are longitudinal in design and which employ national samples and control groups. A preliminary description of program and population has been established, and current evaluation programs are completing the preliminary blueprint outlining relevant dimensions of pupil characteristics, program operation, and immediate and long-range impact. Continued effort must be exerted to develop better methods of assessment, especially of such variables as motivation, values, attitudes, and social development of the children Head Start has served. Further research is needed to specify exactly how Head Start has best achieved its successes. Additional research is needed to establish Head Start's impact on child's physical health and nutritional status, and on his family and home environment. Further investigation will be required to determine how Head Start's immediate gains can be sustained as the child continues through public school. And finally, new programs of research need to be

undertaken to evaluate Head Start's effects on neighborhoods and communities, as well as upon social institutions, community welfare facilities, public education, and the collective social conscience. Head Start will continue to support research in these priority areas.